



The Columbus Health Department Dental Program 2001 Columbus Oral Health Report

Data gathered from the 1999 Columbus Oral Health Survey portion of the 1999 Ohio Oral Health Survey

Data and Analysis Provided by The Ohio Department of Health

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William C. Myers, M.S. Health Commissioner

Michael B. Coleman, Mayor

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Dr. Mark Siegal and the dedicated staff of the Bureau of Oral Health Services, Ohio Department of Health, provided the technical guidance, training, scheduling and data analysis for the survey.

The staff of the Columbus Health Department conducted the actual oral screenings. Dr. Dan Collins was the screening dentist. Susan Strader, RDH, Coordinator of the Dental Sealant Program, and the Dental Sealant Program staff coordinated screenings. Very special thanks is given to Ben DeJesus, Columbus Health Department epidemiologist, who assisted with the organization and presentation of the information for this report.

Dave Heisel, DDS
Dental Program Director &
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Introduction

The 1999 Columbus Oral Health Survey was conducted according to an internal long-range plan that calls for a survey every five years to assess changes in oral health status of the children of Columbus and to assist in planning for needed dental services. Similar oral health surveys had been conducted in 1986 and 1992. The current survey was delayed so that it could be conducted in conjunction with a state wide oral health survey by the Ohio Department of Health. All aspects of the Columbus survey were identical to the State survey so that data would be directly comparable. Six Columbus schools had been chosen by the State survey for the Franklin county sample. Six additional Columbus schools were selected to make up the Columbus survey. All twelve elementary schools were selected on a stratified, random basis according to percent of children eligible for free or reduced cost meals at each school. The selected schools and their percentages are as follows:

Gladstone Elementary	96.4%
Second Avenue Elementary	92.9%
Deshler Elementary	88.6%
Linden Elementary	86.1%
Eakin Elementary	81.2%
Koebel Elementary	77.7%
Broadleigh Elementary	67.4%
Huy Road Elementary	60.3%
Avalon Elementary	53.0%
Binns Elementary	50.8%
Cedarwood Alternative Elementary	43.3%
Ecole Kenwood Alternative Elem.	33.4%

During the survey, a total of 694 first, second and third graders were screened at the selected schools.



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Executive Summary

The City of Columbus water system has been fluoridated since 1973. Since then, tooth decay in Columbus children has declined. However, portions of our population who have lower levels of income and education sufferdisproportionately from dental disease. Past surveys have shown that seventy-five percent of cavities are concentrated in less than 20 percent of Ohio children. For those that are unable to access primary and preventive dental care, dental problems can progress and result in pain, infection, cost, and loss of self esteem.

Franklin county maintains a good dentist to population ratio (1:1,543) compared to the Ohio average (1:2,156). However, Columbus has limited resources to provide dental care for those people that are unable to access private dental offices, usually due to cost. Franklin County has five safetynet dental facilities (Children's Hospital, Columbus Health Department, East Central Neighborhood Health Center, Nisonger Center, and the OSU College of Dentistry) compared to fourteen safety-net facilities in both Cuyahoga and Hamilton counties, who maintain similar size and demographics.

This report provides a snapshot of the oral health status of Columbus children in 1999. Data from this survey allows us to compare data from previous surveys (1986 and 1992) and to help gauge our current efforts to improve oral health care in future surveys.

Although results are discussed in more detail in Sections 2 and 3 of the report, some of the data highlights are as follows:

- Approximately 29% of Columbus children in grades 1 through 3 have untreated dental caries or have decayed teeth (National Healthy People 2010 goal = 21%). Five percent of the children had very large cavities, pain, and/or swelling.
- Approximately 46% of Columbus children in grades 1 through 3 have a history of dental caries, having either unfilled or filled teeth (National Healthy People 2010 goal = 42%).
- Approximately 28% of Columbus children in grades 1 through 3 have preventive dental sealants on their permanent teeth (National Healthy People 2010 goal = 50%).
- Approximately 25% of Columbus 1st 3rd graders have not had a dental visit within the last year.
 About 3% have never had a dental visit

- Approximately 23% of Columbus 1st 3rd graders could not get wanted dental care in the past 12 months. Major reason they could not get care was cost (46%).
- Income Disparity Children eligible for free and reduced school lunches (vs. those ineligible) have a greater proportion of currently decayed teeth (34% vs. 18%), a greater proportion with a history of dental caries (51% vs. 37%), and a fewer proportion who have visited the dentist within the past year (66% vs. 82%).

Background

Columbus Health Department Oral Health Survey

The 1999 Columbus Oral Health Survey was conducted in concert with the 1999 Ohio Oral Health Survey. The survey examined a total of 694 Columbus public school children in grades 1, 2, and 3 at twelve elementary schools. Written consent was obtained from the parents or guardians of each participating child. Schools were selected on a stratified, random basis according to the percent of the children eligible for free or reduced cost lunches. The schools and their percent of children eligible for free or reduced lunches are listed in the introduction.

Examiners from the Columbus Health Department were trained and calibrated with examiners for the state survey. Unlike the previous 1986 and 1992 surveys, the examiners did not collect data at the level of the tooth or tooth surface, but at the level of the individual. The 1999 Columbus oral health screening survey collected data on the following:

- · Demographic information (age, race, gender)
- Access/utilization of dental care (questionnaire)
- Untreated cavities
- · Caries experience
- Sealants
- Urgency of need for dental care

The questionnaire and the data entry form are located in the appendix. Examinations were conducted using portable dental equipment that was transported between schools. Data was entered at the Ohio Department of Health by the Bureau of Oral Health staff.

Results from this and subsequent surveys will assist in assessing our progress towards the National Healthy People 2010 goals. The objectives that will be of main interest are Oral Health Objective 21-1 (Reduce caries experience), Objective 21-2 (Reduce untreated dental decay), and Objective 21-8 (Sealants).



General Results of Survey

The following pages show the general results of the tabulated answers from the oral health survey. The results are broken up by each question asked on the survey. For each question, an overall response percentage is given. Additionally, any subgroup analysis or analysis by any other variables are presented.

I. Currently Has Decayed Teeth

Approximately 29% of Columbus children in 1st through 3rd grade have untreated dental caries or have decayed teeth.

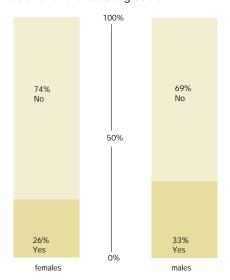
Figure 2-1
Percentage of 1st-3rd graders with and without currently decayed teeth.

29% Yes	71% No

A. gender

Among male 1st-3rd grade children in the Columbus area 33% have currently decayed teeth. Among female 1st-3rd grade children in the Columbus area, 26% have currently decayed teeth. Additional analysis results show no statistical association between gender and current decayed teeth.

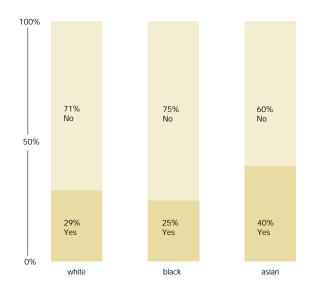
Figure 2-2
Percentage with and without currently decayed teeth within total male and female 1st-3rd graders.



B. race

Analysis within race groupings show that among Asian children in the Columbus area, 60% have currently decayed teeth. Among white and black children, 29% and 25% respectively stated they have currently decayed teeth. Additional analysis results show a borderline association between race and current decayed teeth.

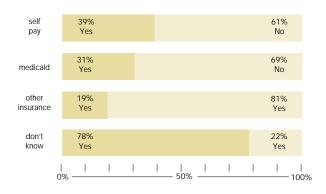
Figure 2-3Percentage with and without currently decayed teeth within white, black, and Asian 1st-3rd graders.



C. payment

Analysis within payment groupings show that among those persons who self-pay, 39% have currently decayed teeth. Among those who are on Medicaid, 31% have currently

Figure 2-4
Percentage within each payment status with and without currently decayed teeth.



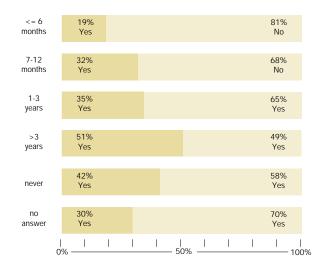
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decayed teeth. Additional analysis results show a significant association between type of payment and current decayed teeth.

D. time since last dental visit

Among children who have visited a dentist within the past year, 25% have currently decayed teeth. Among those who have visited a dentist between 1 to 3 years ago, 35% have currently decayed teeth. Greater than 50% of those who waited over 3 years to see a dentist have currently decayed teeth.

Figure 2-5
Percentage of presence or absence of currently decayed teeth within time since last dental visit groupings.



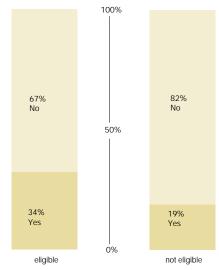
Additional analysis results show a significant association between time since last dental visit and current decayed teeth.

E. eligibility

Among those persons eligible for free and reduced school lunches, 34% have currently decayed teeth. Among those ineligible for free and reduced lunches, 18% have currently decayed teeth. Additional ananlysis results show a ignificant association between free and reduced lunch eligibility and current decayed teeth.

Figure 2-6

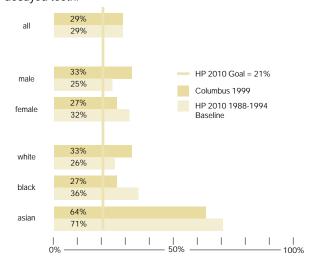
Percentage within total free/reduced lunch eligible and noneligible 1st-3rd graders with and without currently decayed teeth.



F. healthy people 2010

Comparisons to the national Healthy People 2010 overall baseline for untreated dental decay reveal Columbus to be at approximately the same level as national baselines. Although encouraging, the current local proportion of 6-8 year olds with current untreated dental decay is still well above the 2010 goal of 21% or less.

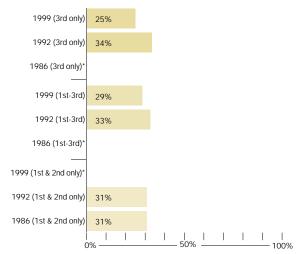
Figure 2-7
Percentage of Columbus 6-8 year olds with untreated decayed teeth.

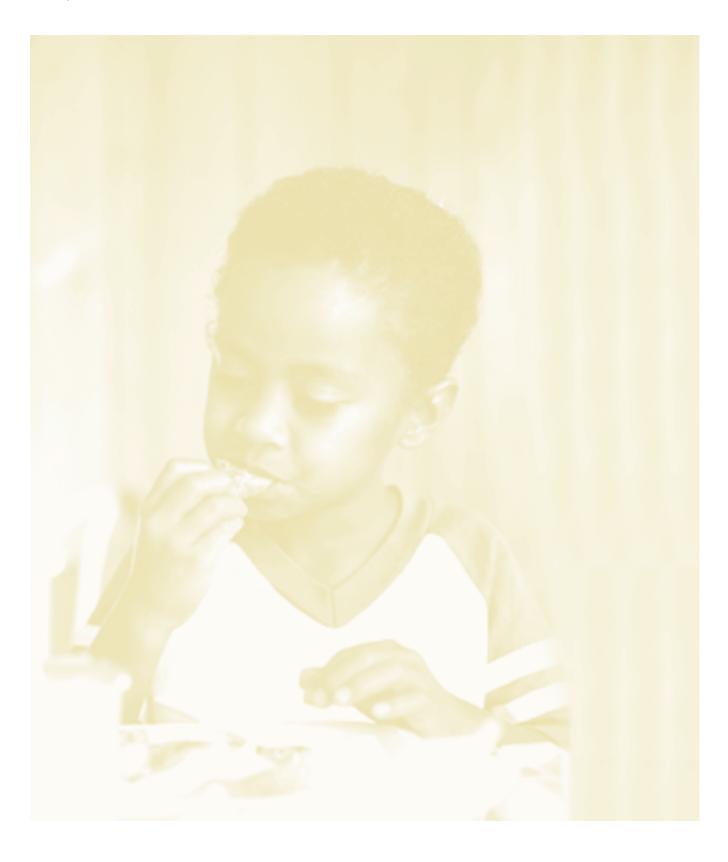


G. columbus trends

Although limited in the ability to give a complete picture of the trends in untreated dental decay, results from past surveys indicate that percentages of untreated dental decay in selected grade groupings generally show improvement or no change (Figure 2-8).

Figure 2-81986, 1992 and 1999 Percentage of Columbus 1st through 3rd graders with untreated dental decay





II. Caries History

Approximately 46% of Columbus 1st through 3rd graders have a history of dental caries.

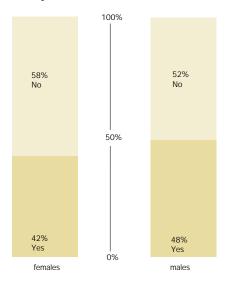
Figure 2-9
Percentage of 1st-3rd graders with and without currently decayed teeth.

46% 54% Yes No

A. gender

Among female 1st-3rd grade children in the Columbus area 42% have a history of dental caries. Among male 1st-3rd grade children in the Columbus area 52% have a history of dental caries. Additional analysis results show no statistical association between gender and history of dental caries.

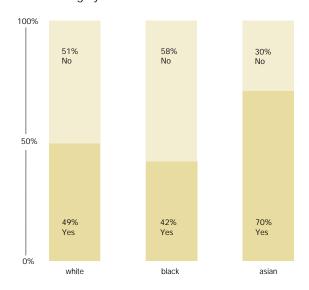
Figure 2-10
Percentage of male and female 1st-3rd graders with and without a history of dental caries.



B. race

Among female 1st-3rd grade children in the Columbus area 42% have a history of dental caries. Among male 1st-3rd grade children in the Columbus area 52% have a history of dental caries. Additional analysis results show no statistical association between gender and history of dental caries.

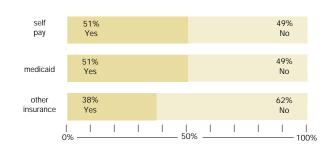
Figure 2-11
Percentage with and without a history of dental caries within each race category.



C. payment

Among those persons who self-pay, 51% have a history of dental caries. Also, 51% of those who are on Medicaid have a history of dental caries, while 38% of those with other dental insurance have a history of dental caries. Additional analysis results show a significant association between type of payment and a history of dental caries.

Figure 2-12
Percentage 1st-3rd graders with and without a history of dental caries within selected payment type.



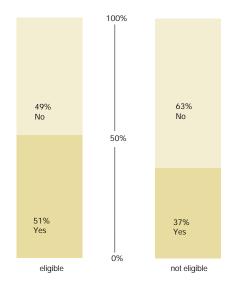
D. eligibility

Among those persons eligible for free and reduced lunches, 51% have a history of dental caries. Among those ineligible for free and reduced lunches, 37% have a history of dental caries. Additional analysis results show a significant association between free and reduced lunch eligibility and a history of dental caries.

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Figure 2-13

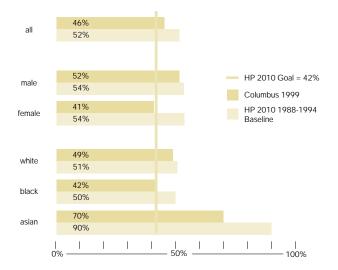
Percentage within total free/reduced lunch eligible and non-eligible 1st-3rd graders with and without a history of dental caries.



E. healthy people 2010

Comparisons to the national Healthy People 2010 overall baseline for proportion of 6-8 year olds with dental caries history reveal Columbus to be below the national percentages (46% vs. 52%). Although encouraging, the current local proportion of 6-8 year olds with a history of dental caries is still above the 2010 goal of 42% or less with dental caries.

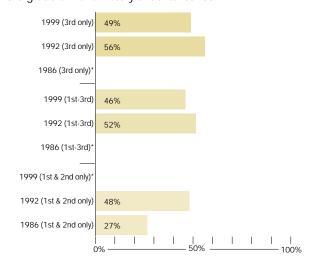
Figure 2-15Percentage of Columbus 6-8 year olds with a history of dental caries.



F. columbus trends

Although limited in the ability to give a complete picture of the trends in dental caries history, results from past surveys indicate that percentages of children with a history of dental caries in selected grade groupings generally show improvement, except between the 1986 and 1992 results for the grades 1 and 2 only category (Figure 2-16).

Figure 2-16
1986, 1992 and 1999 Percentage of Columbus 1st through 3rd graders with a history of dental caries.



^{*}Not Available

III. Dental Sealants

Approximately 28% of Columbus 1st through 3rd graders have sealants in their permanent teeth.

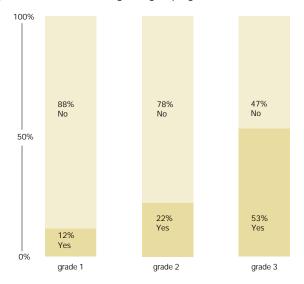
Figure 2-17Percentage of 1st-3rd graders with sealants in their permanent teeth.

46%	54%
Yes	No

A. grade

Analysis within grades shows that among 3rd graders, 53% have dental sealants. Among 2nd and 1st graders, 22% and 12% have dental sealants in their permanent teeth. Additional analysis reveals a strong association between grade level and presence of dental sealants.

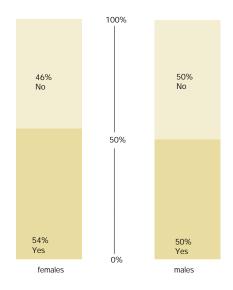
Figure 2-18
Percentage with and without dental sealants in their permanent teeth within grade groupings.



B. gender

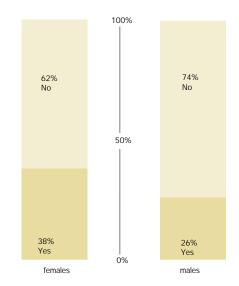
(grade 3 results only) Among female 3rd graders, 54% have dental sealants. Among 3rd grade males, 50% have dental sealants in their permanent teeth. Additional analysis results show no association between gender and dental sealants.

Figure 2-19Percentage among male and female 3rd graders with sealants in their permanent teeth.



(age 8 results only) Among female 8 year olds, 38% have dental sealants. Among 8-year-old males, 26% have dental sealants in their permanent teeth. Additional analysis results show a significant association between gender and presence of dental sealants.

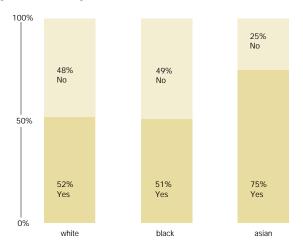
Figure 2-20Percentage of 8 year olds with and without sealants by gender.



C. race

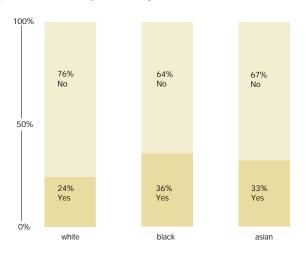
(grade 3 results only) Among Asian children in the Columbus area, 75% have dental sealants. Among black and white 3rd graders, 51% and 52% respectively, have dental sealants. Additional analysis results show no association between race and presence of dental sealants on permanent teeth.

Figure 2-21
Percentage with sealants in their permanent teeth by 3rd grade race categories.



(Age 8 Results Only) Among Asian 8 year olds in the Columbus area, 33% have dental sealants. Among black and white 8 year olds, 36% and 24% respectively, have dental sealants. Additional analysis results show a significant association between race and dental sealants on permanent teeth.

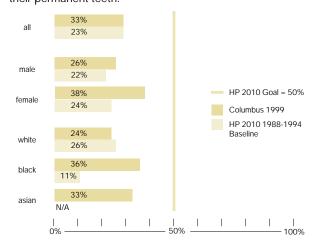
Figure 2-22Percentage of 8 year olds with and without sealants in their permanent teeth by race categories.



D. health people 2010

Comparisons to the national Healthy People 2010 overall baseline for the proportion of 8 year olds with dental sealants on their permanent teeth reveal Columbus to be above the national baseline (33% vs. 23%). Although encouraging, the current local proportion of 8 year olds with dental sealants in their permanent teeth is still below the 2010 goal of 50% or more.

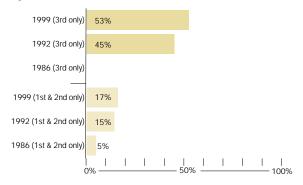
Figure 2-23
Percentage of Columbus 8 year olds with dental sealants in their permanent teeth.



E. columbus trends

Although limited in the ability to give a complete picture of the trends in dental sealants, results from past surveys indicate that percentages of children with dental sealants in selected grade groupings generally show improvement over time (Figure 2-36).

Figure 2-24
1986, 1992 and 1999 Percentage of Columbus 1st through 3rd graders with dental sealants.



IV. Treatment Urgency

Approximately 5% of Columbus 1st through 3rd graders have had the need for immediate dental care or treatment.

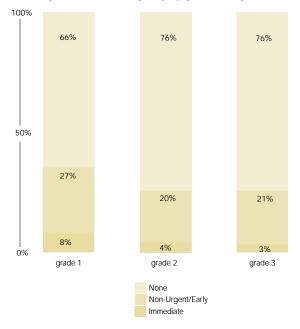
Figure 2-25Percentage of 1st-3rd graders by treatment urgency.



A. grade

Analysis within grades show that among 3rd graders, 3% needed immediate dental care, among 2nd and 1st graders, 4% and 8% respectively have needed immediate dental care. Additional analysis results show no association between grade and treatment urgency.

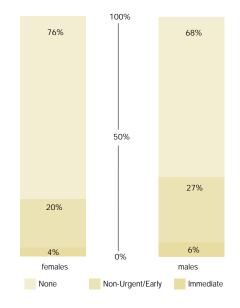
Figure 2-26
Percentage of treatment urgency by grade categories.



B. gender

Among female 1st-3rd grade children in the Columbus area, 4% have a need for immediate dental care. Among male 1st-3rd grade children in the Columbus area, 6% have a need for immediate dental care. Additional analysis results indicate no association betweengender and treatment urgency.

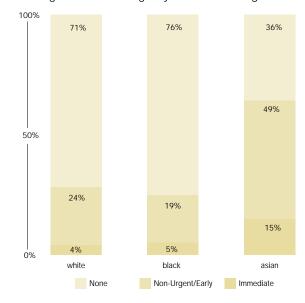
Figure 2-27 Percentage of treatment urgency by male and female 1st-3rd graders.



B. race

Among Asian children in the Columbus area, 15% have had a need for immediate dental care. Among white and black children, 4% and 5% respectively stated they have had a need for immediate dental care. Additional analysis results show a significant association between race and treatment urgency.

Figure 2-28
Percentage of treatment urgency within race categories.

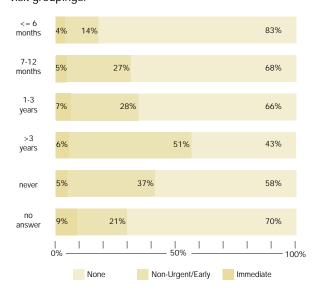


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C. time since last dental visit

Analyses within those persons who have visited a dentist within the past year show that 76% had no treatment urgency. Among those who have waited to visit a dentist between 1-3 years and greater than 3 years, this number declines to 66% and 43% respectively. Additional analysis results show a significant association between time since last dental visit and treatment urgency.

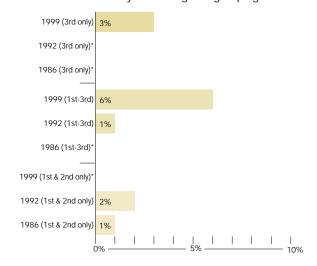
Figure 2-29Percentage of treatment urgency within time since last dental visit groupings.



D. columbus trends

Although limited in the ability to give a complete picture of the trends in dental sealants, results from past surveys indicate that percentages of children in selected grade groupings with a need for immediate dental care has generally increased (Figure 2-30).

Figure 2-30 1986, 1992 and 1999 Percentage of Children in need for immediate dental care by selected grade groupings.



section 3

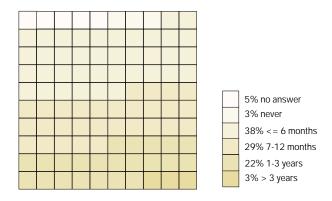
Access Results

The following pages show the results of the access to dental care tabulated answers from the oral health survey. The results are broken up by each question asked on the survey. For each question, an overall response percentage is given. Additionally, any subgroup analysis or analysis by any other variables are presented

I. Ttime Since Last Dental Visit

Approximately 25% of Columbus 1st-3rd graders have not had a dental visit within the last year. Furthermore, about 3% have never had a dental visit.

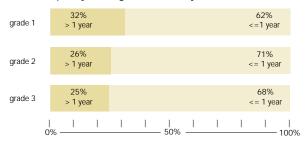
Figure 3-1
Percentage of 1st-3rd graders by time since last dental visit.



A. grade

Analysis within grades show that among 2nd graders, 71% visited a dentist within the past year, among 3rd and 1st graders, 68% and 62% respectively, have visited a dentist within the past year. Additional analysis results show that grade and time since last dental visit are not associated with one another.

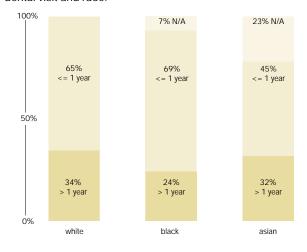
Figure 3-2Percentage within each grade who have visited a dentist within the past year or greater than a year.



B. race

Among white children, 65% have visited a dentist within the past year, among black children, 69% have visited a dentist in the past year, and among Asians, 45% have visited a dentist in the past year. Additional analysis results show no association between race and time since last dental visit.

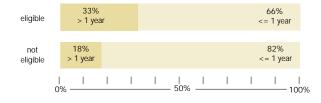
Figure 3-3Percentage of Columbus 1st-3rd graders by time since last dental visit and race.



C. eligibility

Among those persons eligible for free and reduced lunches, 66% have visited a dentist within the past year. Among those ineligible for free and reduced lunches, 82% have visited a dentist within the past year. Additional analysis results show a strong significant association between free and reduced lunch eligibility and time since last dental visit.

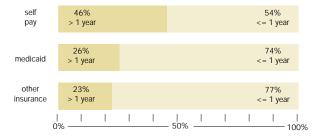
Figure 3-4
Percentage of Columbus 1st-3rd graders by time since last dental visit and eligibility for free and reduced lunch.



D. payment

Among those persons who have Medicaid or have other insurance, 74% and 77% respectively, have had a dental visit in the past year. Among those who self-pay, only 54% have had a dental visit in the past year. Additional analysis results show a significant association between type of payment and time since last dental visit.

Figure 3-5Percentage of Columbus 1st-3rd graders by time since last dental visit and type of payment.



II. Could Not Get Wanted Dental Care

Approximately 23% of Columbus 1st through 3rd graders could not get wanted dental care in the past 12 months.

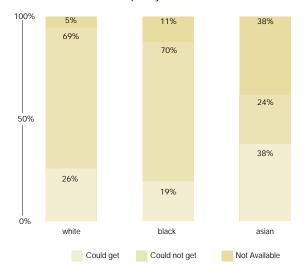
Figure 3-6Percentage of 1st-3rd graders who could and could not get wanted dental care in past year.



A. race

Analysis within race groupings, show that among Asian children in the Columbus area, 24% could not get wanted dental care within the past year. Among white and black children, 69% and 70% respectively stated they have wanted but could not get dental care in the past year. Additional analysis indicates there is a significant association between race and ability to get wanted dental care in the past year. (Note: a large proportion of Asians, around 38%, chose not to answer this question, compared to 5% and 11% for whites and blacks)

Figure 3-7
Percentage within each race category who answered, "Yes" (could not get) or "No" (could get) to ".... could not get wanted dental care in the past year".

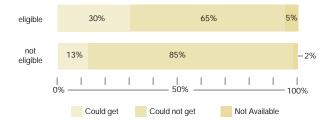


B. eligibility

Among those persons eligible for free and reduced lunches, 64% could not get wanted dental care in the past year. Among those ineligible for free and reduced lunches, 85% could not get wanted dental care in the past year. Additional analysis shows there is a strong association between eligibility status and ability to get wanted dental care in the past year.

Figure 3-8

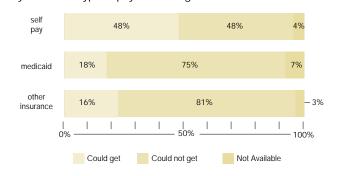
Percentage who answered "Yes" (could not get) or "No" (could get) to "...could not get wanted dental care in the past year" within free/reduced lunch eligibility status.



C. payment

Among those persons who self-pay 48% have wanted dental care but could not get it in the past year. Among those who are on Medicaid or other insured, 75% and 81% respectively, could not get wanted dental care in the past year. Additional analysis results show a strong association between type of payment and ability to get timely wanted dental care.

Figure 3-9
Percentage who answered "Yes" (could not get) or "No" (could get) to "...could not get wanted dental care in the past year" within type of payment categories.

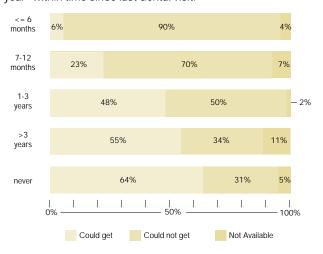


16 access results

D. time since last dental visit

Analysis within time since last dental visit show a relatively high proportion of persons who visited a dentist within the past year who also stated that in the past year they wanted dental care for their child, but could not get it. Additional analysis results show a significant association between time since last dental visit and ability to get wanted dental care in the past year.

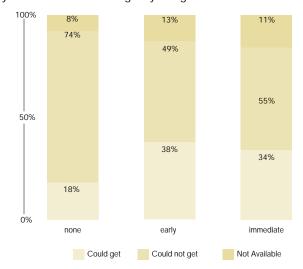
Figure 3-10
Percentage who answered "Yes" (could not get) or "No" (could get) to "...could not get wanted dental care in the past year" within time since last dental visit.



E. treatment urgency

Within treatment urgency categories, 55% of those needing immediate treatment were unable to get wanted dental care within the past year. Among those with no obvious treatment urgency or those requiring early/non-urgent treatment, 74% and 49% respectively, could not get wanted dental care within the past year. Additional analysis results show a significant association between treatment urgency and ability to get wanted dental care in the past year.

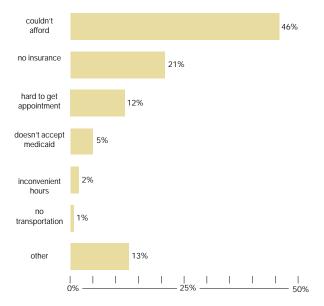
Figure 3-11
Percentage who answered "Yes" (could not get) or "No" (could get) to "...could not get wanted dental care in the past year" within treatment urgency categories.



III. Reason Could Not Get Wanted Dental Care

Among those persons who did not get the dental care they wanted for their child the last time, the number one reason they could not get dental care was cost (46% couldn't afford), followed by no insurance (21%), and finally problems with appointment times (12%).

Figure 3-12 Percentage of those who could not get wanted dental care for their child by main reason.





Appendix

A. 1998-1999 Ohio Department of Health Oral Health Survey and Data Collection/Entry Form

Student Name:	(Last)	_ (First)
Survey Date [mm/dd/yy]:	//	
Student ID:		
Screener Initials:		
School ID:		
Grade:	1=First; 2=Second; 3=Third Grade	
Gender:	1=Male; 2=Female; 9=Unknown	
Race:	1=White; 2=Black; 3=Asian; 4=Pa	cific Islander; 5=Native American; 9=Unknown
Hispanic:	1=Yes; 2=No; 9=Unknown	
Currently has decayed teeth:	1=Yes; 2=No	
Caries History:	1=Yes; 2=No	
Sealants in permanent teeth:	1=Yes; 2=No	
Treatment urgency:	0=None; 1=Earlys; 2=Immediate	

Appendix

B. "Make your Smile Count!" Data & Consent Form

Child's Name:			
Last First		ate of birth (m	onth/day/year)
Teacher's Name	Grade R	oom	
Please answer the next questions to help us learn more want to answer the questions, you may still give permiss			will remain private and will not be shared. If you do not
About how long has it been since your child last visite well as dental hygienists. (Please check one)	ed a dentist? Include all types of dentists, suc	ch as, orthodo	ntists, oral surgeons, and all other dental specialists, as
6 months or less 7-12 months 1-3	years more than 3 years	nas never beer	n to the dentist
2. Is your child's dental care paid by: (Please check the	one way that most dental care is paid for.)		
Family or Self Pay Medicaid (medic	cal card, Medicaid HMO, Healthy Start, CHIF	')	
Other Dental Insurance Don't Know			
3. During the past 12 months, was there a time when you wanted dental care for your child, but could not get it? Yes, I wanted dental care for my child but could not get it. (Please go to Question 4.) No (Please go to Question 6.)			
4. Did you try to get dental care for your child?	No. I did not tout a got doutel core for more	v obild	
Yes, I tried to get dental care for my child.	No, I did not try to get dental care for m	y child.	
5. The last time your child did not get the dental care yo	ou wanted for him or her, what was the <u>main</u> r	eason why you	ur child did not get care? (Please check <u>one</u> answer.)
Could not afford it	No dentist available		No way to get there
No insurance	Dentist doesn't accept Medicaid		Dentist hours are not convenient
Hard to get an appointment	Afraid of going to the dentist		Don't know why
Didn't know where to go	Not a serious enough problem		Wait is too long in clinic / office
6. Is your child eligible for the free/reduced price meal program at school? Yes No Not Sure			
7. Has your child ever had plastic coatings called sealants put on his/her teeth <u>at school</u> ? Yes No Not Sure			
Yes, I give permission for my child to have his/her teeth checked.			
No, I do not give permission for my child to have his/her teeth checked.			
Signature of Parent or Guardian	 Date		
()	()		
Home Phone Number	Work Phone Number		